# INSTRUCTIONS FOR COMPLETING THE FORM (CGI 1560/04e)

# Section I. Military Training and Experience Information

Prior Service: If appropriate, members must attach a legible copy

of the DD214. Copies of DD214s may be obtained from:

National Personnel Records Center

9700 Page Boulevard St. Louis, MO 63132

## Section II. Military School Information

Only list those military sponsored schools that were five days in length. This is the ACE criterion for evaluation of schools, so any schools shorter in length have not been evaluated.

Other government sponsored schools (e.g., Environmental Protection Agency, Federal Law Enforcement Agency, etc) and some corporate training (Bell Lab, Dale Cargnie, etc.) do not have to be 5 days long, so encourage members to list all such schools and attach the Certificate of Completion.

DO NOT list any courses for which CEUs (Continuing Education Units) were awarded. CEUs are not transferable to collegiate credit.

# Section III. Correspondence Courses

No action is necessary. The Institute Database will be accessed to verify correspondence courses completed by the member. Members should not attach letters of completion of courses.

#### Section IV. College Courses

A college transcript is desired (or a legible copy) that contains the course number and department that provided the instruction. This information is important in determining applicability to a degree plan.

# Section V. College Level Examinations

Scores for all tests taken through the DANTES program since 1 July 94 should be on file with the CGI. Scores for test taken prior to 1 July 94 need to be documented by attaching a copy of the official score report. For information on obtaining a free score report for counseling purposes, see Chapter 3 on Examinations and the relevant section for the examination completed.

# Section VI. Preferred Area of Study

Make sure that the area of study specified is one that is available through the Military Credit Recognition Schools. See Chapter 8,

Military Credit Recognition Degree Programs, for a list of available degree programs.

If the member is uncertain or has no idea, leave it blank and the CGI will provide the quickest approach.

## Sections VII and VIII.

Self-explanatory.

#### Section IX. Unit Administrative Data

This section must be completed by the ESO. In the near future, the data may be electronically transmitted back to the ESO for counseling and interpretation with the member.

The Authentication block is extremely important. The signature of this individual certifies that all the information reported by the member is correct. The authentication signatory, usually the ESO, should take whatever steps necessary to ensure the validity of the information. This form is subject to scrutiny and will be examined during the accreditation review of the Coast Guard Institute.

Forms that are not properly completed and authenticated will NOT be processed.

DEPARTMENT OF TRANSPORTATION U.S. COAST GUARD INSTITUTE (5/99) CGI 1560/04e

# **Educational Assessment Worksheet**

<u>Purpose:</u> The information provided in this form is used to (1) complete an evaluation of college credits earned for military learning experiences, and (2) complete a degree plan showing how credits earned apply to an external degree program. Additionally, this information forms the foundation for the USCG transcript and must be completed before a transcript will be issued. Based on this data, an education record is established for the member at the Institute and a transcript can be issued when requested by the member.

## Instructions for Completion:

- 1. Responses to the questions on this form must be clear and accurate. Omitting information, using abbreviations or acronyms, or failing to include support documentation may result in the Institute not be able to find the appropriate entry, delaying (or precluding) the processing of the application.
- 2. Transcripts from colleges attended by the applicant and college test score reports should be attached.
- 3. The ESO signs the form certifying that the data provided is correct.
- 4. Type the information, if possible. If handwritten, please write clearly and legibly.
- 5. INCOMPLETE FORMS WILL NOT BE PROCESSED.

Full Name: First Name	Middle Last Name	SSN:	
Phone Number:	(Work)	Rate/Rank:	g. SN. YN3. LTJG)
Phone Number:	Home)	Fax Number:	
USCG Affiliation: Activ			
I. Military Training a	and Experience Infor	rmation:	
I. Military Training a Member's Promotion Histo		Prior Service Rate/MOS/	
Member's Promotion Histo	ry:		214).
Member's Promotion Histo Promoted to: (e.g. SN)	Effective:	Prior Service Rate/MOS/ (attach a copy of DD	214). Effective:to
Member's Promotion Histo  Promoted to:  (e.g. SN)  Promoted to: (e.g. YN3)  Promoted to: (e.g. YN2)	Effective:   MM/YY  Effective:  MM / YY   MM / YY	Prior Service Rate/MOS/ (attach a copy of DD  Promoted to: (e.g., 91C10)	214). Effective:to
Member's Promotion Histo  Promoted to:  (e.g. SN)  Promoted to: (e.g. YN3)  Promoted to: (e.g. YN2)	Effective:   MM/YY  Effective:  MM / YY   MM / YY	Prior Service Rate/MOS/ (attach a copy of DD  Promoted to:	214).  Effective: to MM/YY  Effective: to MM/YY
	Effective:  MM/YY  Effective:  MM/YY  Effective:  MM/YY  Effective:  MM/YY  Effective:  MM/YY	Prior Service Rate/MOS/ (attach a copy of DD Promoted to: (e.g., 91C10)  Promoted to: (e.g., 91C10)	214).  Effective: to MM/YY  Effective: to MM/YY

Full Name:	First Name	Middle	Last Name	_ SSN:			
	School Informa						
(List only those USCG courses 5 or more days in length. List all courses attended from other DOD, government, or private agencies unless continuing education units were awarded (CEUs). If CEUs were awarded the credits will not be transferable to collegiate level work. Do not use abbreviations or acronyms. Insert the full title of the course as noted on the certificate of completion.)							
	Γitle (Basic Mi chool, C school,		Location (TraCen Cape May	Course No.	Length	Date Started	Date Complete

Full Name:			SS	SN:	
<del>-</del>	First Name	Full Middle Name	Last Name		
III. Correspond	ence Courses				
you've complete	ed which match ies of letters of	evaluations conduct	ed by the America	lecting correspondence cour in Council on Education. Ple illitary services, attach	
IV. College Co	ourses				
Attach copies	of transcripts re	flecting any prior co	llege courses com	pleted.	
V. College-Le	evel Examination	ons			
Attach copies	of score report	ts documenting test	ts completed.		
VII. Degrees p	oreviously earr	ned:			
		r's degree or highe r links to college p	, ,	will not be provided. See	the
	(e.g. Associates in	Arts in History)	at _	(e.g. Hometown State College, Youngs	stown, GA)
VIII. Member	's Verification				
permission for institutions off be given to or	the USCG In Tering military ther institution	stitute to discuss credit recognition	personal education degree programs arty without the	of 1973, the applicant ion information with part . Personal information s applicant's written perrand accurate	nership hall not
Me	ember's Signature			Date (dd-mmm-y	y)
IX. Unit Ad	ministrative	Data: (To be con	npleted by the Ed	lucation Services Officer.	)
The member abo	ove is scheduled	for release from act	ive duty:	v.	
Preferred Area	s of Study		MIM/DD/ I	ı	
college experie	ence and know he type or maj	s the type of degree or, or simply wants	e desired, so indest the fastest appr	on. If the member has pricate. However, if the memoach, advise them that usulitary learning experiences	mber is ally a
		(Intended major )		AA/AS BA/BS	<u>}</u>
	,	amended major j		(marcate fever)	

Full Name:				SSN:	
	First Name	Full Middle Name	Last Name		
Services Officer verifies that the nformation found of the person was the PERSRU we certificates from	r, Personnel Offi information pre- and in the Persor insferred from en- rith supporting d	cer, or Administrates on this que and Data Record of the individual ocumentation that ere not entered in	ative Chief Petty stionnaire is true of the individual dual's personnel i identifies the en	the signature of the Educ Officer. The signature as e and accurate and mate I. If a discrepancy appea data record, the member error, such as course con Corrections must be ma	hes the ars in the er must present inpletion
Name o	of Verifying Official	Rate/	Rank	Signature	Date
Title o	f Verifying Official	Phone N	Number		
MAIL COMPI	ETED FORM	ГО:	COMN	AANDING OFFICER	